IL DEPT OF TRANSPORTATION DIVISION OF TRAFFIC SAFETY ACCUMULATED TOTALS

City Summary

Selection Criteria: 1/1/2007 thru 12/31/2007

NUMBER OF CRASHES

INJURY SEVERITY

| | | NOMBER OF CIVACITES | | | | | | INOUTH OF VEHILL | | | | |
|------------------------|-------|---------------------|------------|----------|----------|--------|----------|------------------|---|---|---|--|
| | TOTAL | 5474 1 | IN III IDV | PROPERTY | TOTAL | TOTAL | TOTAL | | | 0 | | |
| Clear Lake | TOTAL | FATAL | INJURY | DAMAGE | VEHICLES | KILLED | INJURED | A | В | С | 0 | |
| WEATHER CONDITION | 4 | 0 | 1 | 0 | 4 | 0 | 4 | 0 | 1 | 0 | 0 | |
| Clear TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | <u> </u> | 0 | 1 | 0 | 0 | |
| | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TYPE OF CRASH | 4 | 0 | 4 | 0 | 4 | 0 | 4 | 0 | 4 | 0 | 0 | |
| Fixed object TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | <u> </u> | 0 | 1 | 0 | 0 | |
| | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| CLASS OF CITY | 4 | 0 | 4 | 0 | 4 | 0 | 4 | 0 | 4 | 0 | 0 | |
| 0 TO 2,500 TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| ROAD SURFACE CONDITION | | _ | | _ | | | | | | | _ | |
| Dry | | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| CLASS OF TRAFFICWAY | | | | | | | | | | | | |
| Unmarked Highway Urban | | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| DAY OF WEEK | | | | | | | | | | | | |
| Thursday | 1 | 0 | 1 | 0 | 1 | 0 | <u> </u> | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TIME OF DAY | | | | | | | | | | | | |
| 7 PM | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| LIGHT CONDITION | | | | | | | | | | | | |
| Darkness, Lighted Road | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | | 0 | 1 | 0 | | | | <u> </u> | | | 0 | |
| ROAD DEFECTS | | | | | | | | | | | | |
| No Defects | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | 1 | 0 | | | | <u></u> | | | 0 | |
| TRAFFIC CONTROL | | | | | | | | | | | | |
| Lane Use Marking | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | | 0 | 1 | 0 | | | | | | | 0 | |
| ROADWAY FEATURE | | | | | | | | | | | | |
| Not Applicable | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 | |
| TOTALS | 1 | 0 | | | | | | | | | 0 | |
| | • | • | • | • | • | • | • | • | • | • | • | |

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NUMBER OF CRASHES INJURY SEVERITY

| Clear Lake | TOTAL | FATAL | INJURY | PROPERTY DAMAGE | TOTAL VEHICLES | TOTAL KILLED | TOTAL INJURED | А | В | С | 0 |
|----------------------------|-------|-------|--------|--------------------|-------------------|-----------------|------------------|---|---|----------|---|
| VEHICLE DEFECTS No Defect | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 |
| TOTALS | 1 | 0 | 1 | | | | 1 | | | <u> </u> | 0 |
| VEHICLE TYPE Pickup TOTALS | 1 | 0 | 1 | 0 | 1 | 0 - | 1 | 0 | 1 | 0 _ | 0 |
| IOIALO | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 0 |

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|--|------|-------|--------|--------|--------------------|-------------------|-----------------|------------------|-------|--------|---|---|
| DRIVER CONDITION Alcohol Impaired TOTALS | | 1 | 0 | 1 | 0 _ | 1 <u>1</u> | 0 - | 1 | 0 _ | 1 1 | | 0 |
| DRIVER AGE/GENDER 40-44 TOTALS | Male | 1 | 0 0 | 1 1 | | 1 1 | | 1 1 | 0 | 1 1 | | 0 |